**INCIDENT REPORT**

Incident #: 18-254-0249-00

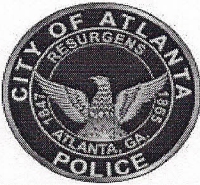
Prepared:

9/15/2018 12:56:56 PM

Workflow Status: Report Approved by Central Records

Incident Info							
Incident #	Report Date	Time	Date Occurred	Time	Poss. Date	Time	Beat
182540249-00	9/11/2018	0447	9/11/2018	0333	9/11/2018	0440	508
Shift	Zone	Location		Location Type	Rpt. District	Rpt. Officer	Inv. Officer
E	05	250 WILLIAMS ST NW		11	508	6358	
Children Inv.	Family Inv.	Gang Related	Prev. Complaints	Prior Court Orders	Disposition	Dispo. Date	Time
How Committed							
CRIMINAL TRESPASS							
Reason No Arrest					Relationship of Parties		Weather

Offenses								
1	Offense		Offense					# of Victims
	5707		CRIMINAL TRESPASS					1
	IBR Code	Att/Comp	UCR	UCR Arson	UCR Status	Bias Incident	Method of Entry	Family Violence
5707	C	2600	0				N	

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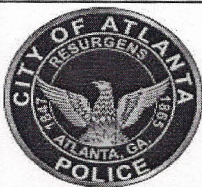
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Involved Parties

1	Name Type					Name									
	VICTIM					AMERICAN CANCER SOCIETY,									
	Address					Bldg.		Apt. #		Home Phone					
	250 WILLIAMS ST NW, ATLANTA, GA 30303									(404) 688-5425					
	DOB	Age	DL Number	DL State	DL Expire	Sex	Race	Height	Weight	Hair	Eyes				
	Hair Style		Hair Type		Facial Hair			Complexion							
	Appear	Speech	Hand	Gloves	Teeth	Glasses	Hat	Mask	Eye Defect	Skin Tone Type	Clothing Type				
	Body Markings Type		Body Markings Description												
	Injury / Killed		Injury / Severity		Location on Body		Where Hospitalized								
	NOT INJURED														
	SSN		Occupation								GCIC Code				
Employer		Employer Address					Work Phone		Wk. Ext.						
2	Name Type					Name									
	WITNESS					HUGHEY, KHADIJAH									
	Address					Bldg.		Apt. #		Home Phone					
	5291 CAMPER PLACE, STN MTN, GA 30088									(404) 688-5425					
	DOB	Age	DL Number	DL State	DL Expire	Sex	Race	Height	Weight	Hair	Eyes				
	6/23/1978	40				F	B								
	Hair Style		Hair Type		Facial Hair			Complexion							
	Appear	Speech	Hand	Gloves	Teeth	Glasses	Hat	Mask	Eye Defect	Skin Tone Type	Clothing Type				
	Body Markings Type		Body Markings Description												
	Injury / Killed		Injury / Severity		Location on Body		Where Hospitalized								
	NOT INJURED														
	SSN		Occupation								GCIC Code				
Employer		Employer Address					Work Phone		Wk. Ext.						

No Suspects to Display!

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Arrests

Name Type	Name	Location				County				
Arrest	MAY, ANTONIO									
Address		Bldg.	Apt. #	Home Phone						
1505 OLD CLINTON RD, MACON, GA 31211			503							
DOB	Age	DL Number	DL State	DL Expire	Sex	Race	Height	Weight	Hair	Eyes
5/8/1986	32				M	B				
SSN		Occupation								
Employer		Employer Address				Work Phone		Wk. Ext.		
Charge Type	Charge Num	Section	Remarks							
GM	1	16-7-21								
GM	2	99-WAR-OTH								

No Vehicles to Display!

No Property to Display!

Narrative

On today's date September 11, 2018 I, Officer Jolly was dispatched to 250 Williams in regards to a Criminal Trespass call.

Upon my arrival to the above location I immediately observed one of the glass windows of the American Cancer Society building shattered. I then heard a male yelling from the intersection of John Portman and Williams and noticed the subject laying out on the ground with his arms spreaded out. At that time myself and unit 1512 Officer Hordesky approached the subject and detained him. I then spoke with security Officer Hughey who advised the subject threw 5 rocks at the glass causing it to shatter. The subject Mr. May admitted to throwing the rocks saying he wanted to go to jail. After speaking with security Mr. May was transported to the precinct where I was able to obtain warrants. Mr. May advised he was not feeling well and was transported to Grady detention where I was able to release custody to the correctional officers with no incident. Other than what has been documented above I have nothing further to report. On this day I was driving vehicle 31714 bnjolly@atlantaga.gov

THE UNDERSIGNED, BEING DULY SWORN, UPON HIS OR HER OATH, DEPOSES AND STATES THAT THE FOREGOING IS TRUE, CORRECT COMPLETE AND LEGIBLE TO THE BEST OF HIS/HER KNOWLEDGE AND BELIEF.

Reporting Officer (Elec. Sig.)	ID #	Assignment	Gender	Signed Date
JOLLY (YES)	6358	508		9/13/2018
Supervisor (Elec. Sig.)	ID #	Assignment	Gender	Signed Date
GENSON (YES)	2944	508		9/13/2018
Clerk ID # 3427	File Date	9/15/2018 12:55:23 PM		

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